FORM B10 (Official Form 10) (Rev. 4/98)				
United States Bankruptcy Court SOUTHERN DISTR 61288, Houston TX 77208 (Houston Div	RICT OF TEXAS P.O.Box vision)	PROOF OF CLAIM		
Name of Debtors	Case Number			
Stage Stores, Inc., a Delaware corporationSpecialty Retailers, Inc., a Texas corporationSpecialty Retailers, Inc. (NV), a Nevada corporation	00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	Creditor ID#: 788 c36d 37 Creditor ID#: 788 c36d 37 Hed States Bankruptcy Texas Southern District of Texas Southern FILED		
*place an "x" beside the name of the Debtor you are filing a claim against		o 0 5000		
Name of Creditor (The person or other entity to whom the debtor owes money or property): L & E Packaging	Check box if you are aware that anyone else a filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	Michael N. Milby, Clerk		
Name and address where notices should be sent: ***********************************	Check box if you have never received any notices from the bankruptcy court in this caseCheck box if the address			
	differs from the address on the envelope sent to you by the court.			
Account or other number by which creditor identifies debtor:	Gheck here - <u> </u>	iously filed claim, dated:		
1. Basis for Claim Goods sold Services performed Money loaned Personal injury/wrongful death Taxes Other	Retiree benefits as defined in 11 U Wages, salaries, and compensatio Your SS#: Unpaid compensation for services from to (date)	n (Fill out below)		
2. Date debt was incurred:	3. If court judgment, date ob	tained:		
 Total Amount of Claim at Time Case Filed: \$ (\$\sum_{\text{Policy}} \cdots \text{OO})\$ If all or part of your claim is secured or entitled to priority, also complete Check this box if claim includes interest or other charges in additional charges. Secured Claim. Check this box if your claim is accurred by called a little of the control of the c	te Item 5 or 6 below. On to the principal amount of the claim. 6. Unsecured Priority Claim.	Attach itemized statement of all interest or		
 Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: Real Estate Motor Vehicle Other All personal and intangible property of Debtor's Estate Value of Collateral: \$ 	U.S.C. § 507(a)(3) Contributions to an employee benefit pla Up to \$1,950* of deposits toward purchat personal, family, or household use - 11 to	\$4,300),* earned within 90 days before filing of ne debtor's business, whichever is earlier - 11 in - 11 U.S.C. § 507(a)(4).		
Amount of arrearage and other charges <u>at time case filed</u> included in secured claim, if any \$	Taxes or penalties owed to governmenta Other – Specify applicable paragraph of	al units - 11 U.S.C. § 507(a)(8). 11 U.S.C. § 507(a). 98 and every 3 years thereafter with respect to		
7. Credits:—The amount of all payments on this claim has been credited and de the purpose of making this proof of claim. 8. Supporting Documents: Attach copies of supporting documents, such notes, purchase orders, invoices, itemized statements of running accounts, contributing court judgments, mortgages, security agreements, and evidence of perfection of DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are not available,	n as promissory racts	This Space is for Court Use Only		
explain. If the documents are voluminous, attach a summary. 3. Date-Stamped Copy: To receive an acknowledgment of the filing of you enclose a stamped, self-addressed envelope and copy of this proof of claim.	292			
Sign and print the name and title, if any, of the creditor or other cattach copy of powers of attorney, if any): 7 / 18 / 00				
Penalty for presenting fraudulent claim: Fine of up to \$500,000) [8 U.S.C. §§ 152 and 3571.		

GREENSPONO, NC 27415-4429

2 TOO SUMMIT AVENUE
GREENSBORO, NC 27405

PHONE: 336-621-2570

TOLL FREE: 888-353-0383

FAX: 336-621-5525



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37833

L&E PACKAGING

INVOICE

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BILLING MAKE & HOLD INVENTORY

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STAGE STORES, INC.

ATTN: DOMINIQUE QUIETTERREZ

HOUSTON TX 77233

INVOICE DATE YOUR ORDER NO. OUR ORDER NO. TERMS

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			ALL SHIPMENT UNLESS OTHER	TS ARE RWISE SF	F.O.B. GREENSBOR PECIFIED BY THIS INV	RO, NC VOICE.					
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